

Cown of Wilmington

121 Glen Road, Wilmington, MA 01887-3597

Application for Employment

The Town of Wilmington is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For:			Date of Application:						
How Did You Learn About The	Position?								
Advertisement	Frie	nd	_ Walk-In						
Employment Agency	Rela	tive	Other						
Last Name:	First Name:		Middle Name	2:					
Address: Number	Street	City	State	Zip Code					
Telephone Number(s):		Social Se	curity Number:						
If you are under 18 years of age, c	an you provide requ	uired proof of you	r eligibility to work?	Yes	No				
Have you previously sought emplo	Yes	 No							
		, 3	If Yes, give date	e(s)					
Have you ever been employed by t	he Town?			Yes	No				
			If Yes, give do						
Are you currently employed?				Yes	No				
May we contact your present empl	Yes	No							
Are you prevented from lawfully b		in this country be	ecause of Visa or						
Immigration status? Proof of citizenship or immigration status will be required upon employment.					No				
· · ·		wiii oe requirea up	он етрюутені.	Yes	110				
On what date would you be availed	iote for works								
Are you available to work: Full Time	Part Time	Ev	enings/Weekends	Temporary					
Are you currently on "lay-off" stat	us and subject to re	call?		Yes	No				
Have you been convicted of a felor									
Conviction will not	necessarily disqualify	v an applicant from	employment.	Yes	No				
If Yes, please explain									

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

1. Employer		Dates E	mployed	$Work\ Performed$	
	Address		From	To	
	Telephone Number(s)				
	Job Title	Supervisor	Hourly Ro	nte/Salary	
	Reason for Leaving	1	Starting	Final	
2.	Employer		Dates E	mployed	Work Performed
	A 7.1		Barco B	mproyea	Work 1 cryormea
	Address		From	То	
	Telephone Number(s)				
	Job Title	Supervisor	Hourly Ro	nte/Salary	
	Reason for Leaving	1	Starting	Final	
3. Employer		Dates E	mployed	Work Performed	
	Address	From	То		
	Telephone Number(s)				
	Job Title	Supervisor	Hourly Ro	nte/Salary	
	Reason for Leaving	1	Starting	Final	
	If you need	additional space, please continue	on a caparata sheet of	nanar or attac	h rooumá
•			on a separate sneet of	paper or anac	п гезите.
<i>p</i>	<mark>ecial Skills and Quali</mark> Summarize sp	t zications ecial job related skills and qualificati	ons acquired from emplo	oyment or other	experiences.

EDUCATION

	High School		Undergraduate College/ University			Graduate/Professional						
School Name and Location												
Years Completed	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree		1	1	I			l	1				
Describe Course of Study												
Describe any specialized training, cou	ırsewoi	rk or apj	prentice	ships								
Describe any professional/skilled cert that you are seeking.	tificati	ons or li	censes t	hat you	have ob	otainea	l, that	you are	eligibl	le to ob	otain o	r
List professional, trade, business or civic activities and offices held. You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, handicap or other protected status:												
Which, if any, foreign languages do you speak, read and/or write?												
Have you ever had any job-related training in the United States military? Yes No If Yes, please describe:												
Attach resume or state any information you feel may be helpful to us in considering your application:												
REFERENCES												
Give name, address and telephone not											_	

SPECIAL EMPLOYMENT NOTICE TO DISABLED VETERANS, VIETNAM ERA VETERANS AND INDIVIDUALS WITH PHYSICAL OR MENTAL HANDICAPS.

Government contractors are subject to Section 402 of the Vietnam Era Veterans Readjustment Act of 1974 which requires that they take affirmative action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended which requires government contractors to take affirmative action to employ and advance in employment qualified handicapped individuals.

If you are a disabled veteran, or have a physical or mental handicap, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodation to enable you to perform the job in a proper and safe manner. This information will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect any consideration you may receive for employment.

If you wish to be identified, please sign below.						
Handicapped Individual Vietnam Era Veteran	Disabled Veteran					
	Signed:					
APPLICANT'S STATEMEN	NT					
employment decision. I authorize the Town of Wilmington to undergo a CORI of	iis application for employment as may be necessary in arriving at an evaluation in conjunction with my application for employment. is leading information given in my application or interview(s) may result ide by all rules and regulations of the employer. Date					
FOR EMPLOYER'S USE ONLY						
Arrange Interview Yes No Remarks						
Employed Yes No Job Title Hourly Rate/Salary\$	Date of Employment Department					
By:	Name and Title Date					